

Exhibit 20:

Petition to Discontinue Sex Offender
Registration, Form MC 406a

STATE OF MICHIGAN JUDICIAL DISTRICT JUDICIAL CIRCUIT COUNTY	PETITION TO DISCONTINUE SEX OFFENDER REGISTRATION	CASE NO. and JUDGE (A)
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(B) ORI MI- _____ Court address _____ Court telephone no. _____

(C) THE PEOPLE OF <input type="checkbox"/> The State of Michigan <input type="checkbox"/> _____	v	Defendant's name, address, and telephone no. <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">CTN/TCN</td> <td style="width: 33%;">SID</td> <td style="width: 34%;">DOB Put DOB in Ref. No. row 1 on MC 97.</td> </tr> </table>			CTN/TCN	SID	DOB Put DOB in Ref. No. row 1 on MC 97.
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In the matter of _____ <small>First and last name(s), alias(es)</small>							

- (D)** 1. On _____ I was convicted of the following offense _____.
☐ I was not confined for this offense. ☐ I completed the term of confinement for this offense on _____.
- (E)** 2. a. ☐ I am a Tier I offender and at least 10 years have passed since I was convicted or since I was released from confinement for the conviction. **OR**
☐ I am a Tier III offender and at least 25 years have passed since I was adjudicated or since I was released from confinement for the adjudication. **AND**
- 1) I have not been convicted of any felony or any offense listed in MCL 28.722(r), (t), or (v) since the date of my conviction or the date of my release from any confinement for this conviction.
- 2) I have successfully completed my assigned period of supervised release, probation, or parole without revocation at any time of that supervised release, probation, or parole.
- ☐ 3) I was ordered to complete a sex offender treatment program and I successfully completed that program.
- ☐ b. I was convicted of an offense listed in MCL 28.722(r), (t), or (v), and the conviction was for an offense that was the result of a consensual sexual act between me and the victim, and the victim was 13 years of age or older but less than 16 years of age at the time of the offense and I was not more than 4 years older than the victim.
- ☐ c. I was convicted of a violation of MCL 750.158, 750.338, 750.338a, 750.338b, or 750.520c(1)(i) as a result of a consensual act and the victim was 16 years of age or older and not under my custodial authority at the time of the violation.
- ☐ d. I was registered under the Sex Offenders Registration Act before July 1, 2011 for an offense that required registration and the offense no longer requires registration.
- ☐ e. I was adjudicated as a juvenile for an offense listed in MCL 28.722(r), (t), or (v), and I was less than 14 years of age at the time of the offense.
3. **I request** that the court issue an order to discontinue sex offender registration as provided by law.

(F) _____
 Signature

(G) Subscribed and sworn to before me on _____
 Date

 Deputy clerk/Notary public signature

My commission expires on _____.
 Name (type or print) _____

Notary public, State of Michigan, County of _____. ☐ Acting in the County of _____.
☐ This notarial act was performed using an electronic notarization system or a remote electronic notarization platform.

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Case No. _____

NOTICE OF HEARING

H A hearing will be held on the above petition to discontinue registration on _____
Date and time
at _____ before _____
Location

NOTE: The victim has the right to attend this hearing and to make a written or an oral statement to the court before any decision regarding this petition is made. The victim is not required to appear at this hearing against his or her will.

If you require accommodations to use the court because of a disability or if you require a foreign language interpreter to fully participate in court proceedings, please contact the court immediately to make arrangements.

CERTIFICATE OF MAILING

I served a copy of this petition and notice of hearing on the prosecuting official by first-class mail addressed to his/her last-known addresses as defined by MCR 2.107(C)(3). I declare under the penalties of perjury that this certificate of mailing has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

I _____
Date

Petitioner/Attorney signature